

<p style="text-align: center;"><i>Effective on 12/08/2004.</i> FEE TRANSMITTAL For FY 2007</p>		<p style="text-align: center;">Complete if Known</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td>Application Number</td><td>09/301,766-Conf. #6045</td></tr> <tr><td>Filing Date</td><td>April 29, 1999</td></tr> <tr><td>First Named Inventor</td><td>Eijiro WATANABE</td></tr> <tr><td>Examiner Name</td><td>D. H. Kruse</td></tr> <tr><td>Art Unit</td><td>1638</td></tr> <tr><td>Attorney Docket No.</td><td>0020-4559P</td></tr> </table>		Application Number	09/301,766-Conf. #6045	Filing Date	April 29, 1999	First Named Inventor	Eijiro WATANABE	Examiner Name	D. H. Kruse	Art Unit	1638	Attorney Docket No.	0020-4559P
Application Number	09/301,766-Conf. #6045														
Filing Date	April 29, 1999														
First Named Inventor	Eijiro WATANABE														
Examiner Name	D. H. Kruse														
Art Unit	1638														
Attorney Docket No.	0020-4559P														
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27															
TOTAL AMOUNT OF PAYMENT	(\$)	2,660.00													

METHOD OF PAYMENT (check all that apply)	
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____	
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number <u>02-2448</u> Deposit Account Name: <u>Birch, Stewart, Kolasch & Birch,</u>	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee	
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Credit any overpayments	

FEE CALCULATION							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
	FILING FEES		SEARCH FEES		EXAMINATION FEES		
	<u>Small Entity</u>		<u>Small Entity</u>		<u>Small Entity</u>		
Application Type	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fees Paid (\$)
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____
							<u>Small Entity</u>
							Fee (\$)
							Fee (\$)
Each claim over 20 (including Reissues)							50 25
Each independent claim over 3 (including Reissues)							200 100
Multiple dependent claims							360 180
Total Claims		Extra Claims		Fee (\$)		Fee Paid (\$)	
18		- 27 =		x		=	
HP = highest number of total claims paid for, if greater than 20.							
Indep. Claims		Extra Claims		Fee (\$)		Fee Paid (\$)	
8		- 17 =		x		=	
HP = highest number of independent claims paid for, if greater than 3.							
3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof		Fee (\$)	Fee Paid (\$)		
- 100 =	=	/50 =		(round up to a whole number) x	=		
4. OTHER FEE(S)							
Non-English Specification, \$130 fee (no small entity discount)						Fees Paid (\$)	
Other (e.g., late filing surcharge): 1255 Extension for response within fifth month						2,160.00	
1402 Filing a brief in support of an appeal						500.00	

SUBMITTED BY			
Signature	#47,609	Registration No. (Attorney/Agent)	36,623
Name (Print/Type)	Mark J. Nudell	Telephone	(858) 356-5959
		Date	July 23, 2007